

**U.S. IMMIGRATION AND CUSTOMS ENFORCEMENT
ENFORCEMENT AND REMOVAL OPERATIONS
ICE HEALTH SERVICE CORPS**

**SIGNIFICANT EVENT NOTIFICATION
AND SIGNIFICANT MEDICAL CASE REPORTING**

**IHSC Directive: 01-25
ERO Directive Number: 11769.2
Federal Enterprise Architecture Number: 306-112-002b
Effective Date: 4 Mar 2016**

**By Order of the Acting Assistant Director
Stewart D. Smith, DHSc/s/**

- 1. PURPOSE:** The purpose of this directive is to set forth the policies and procedures to support a reporting process that aligns with the ICE Significant Event Notification (SEN) Program, specifically related to significant medical events; and, to ensure that the appropriate update/summary on the detainee's medical condition is provided.
- 2. APPLICABILITY:** This Directive applies to all IHSC personnel, including but not limited to, Public Health Service (PHS) officers and civil service employees supporting health care operations in ICE-owned or contracted detention facilities and to IHSC Headquarters (HQ) staff. Federal contractors are responsible for the management and discipline of their employees supporting IHSC.
- 3. AUTHORITIES AND REFERENCES:**
 - 3-1.** Title 8, Code of Federal Regulations, section 235.3 (8 CFR 235.3), Inadmissible Aliens and Expedited Removal;
 - 3-2.** Section 232 of the Immigration and Nationality Act (8 USC 1222), Detention of Aliens for Physical and Mental Examination;
 - 3-3.** Title 8, Code of Federal Regulations, Section 232 (8 CFR 232), Detention of Aliens for Physical and Mental Examination;
 - 3-4.** Section 322 of the Public Health Service Act (42 USC 249(a)), Medical Care and Treatment of Quarantined and Detained Persons;
 - 3-5.** Title 42, U.S. Code, Public Health Service Act, Section 252 (42 USC 252); Medical Examination of Aliens.

- 4. POLICY:** The SEN is an intranet/web-enabled reporting application that was designed and developed by ICE to provide timely information to ICE HQ managers on momentous or notable incidents, events, or activities that involve or impact ICE agents and staff in the field in carrying out their law enforcement missions. ICE developed the SEN reporting application to allow quicker and easier, as well as more secure and accurate, reporting of Significant Incident Reports (SIR). IHSC facilities may have medical concerns that do not necessarily meet the criteria for a SEN; nevertheless, they may require notification to IHSC leadership.

4-1. Reportable Incidents through a SIR: Significant medical incidents for the purpose of this directive include, but are not limited to, the following:

- a. Abuse/Neglect
- b. Serious Injury
- c. Medical or Psychiatric Emergency
- d. Suicide Attempt
- e. Hunger Strike
- f. Hospital Admission and Discharge
- g. Death
- h. Sexual Assault

4-2. IHSC Roles and Assignments Regarding SIR: See *IHSC Significant Event Notification Guide*.

4-3. Medical Status Updates for SEN/SIR and Other Significant Medical Cases: The Health Services Administrators (HSA) and Field Medical Coordinators (FMC) provide medical status updates to their leadership to support the SIR process for SEN submissions when the criteria for a significant medical incident are met. The medical updates include: ER referrals (i.e., Circulation, Airway, Breathing (CAB) issues, loss of consciousness, overdose, major trauma), and all hospital admissions, hunger strikes, and suicide attempts. The updates are provided even when a SEN is not submitted by ICE and a SIR is not required by ICE.

See *IHSC Significant Event Notification Guide* for more information.

4-4. Medical Updates Following a SIR and Other Significant Medical Case: See *IHSC Significant Event Notification Guide*.

5. **PROCEDURES:** All procedures are found in the *Significant Event Notification Guide* located at [ALL GUIDES](#).

6. **HISTORICAL NOTES:** This version adds reference to J-A-08 and updates the recordkeeping section. It also adds definitions.

7. **DEFINITIONS:**

Field Medical Coordinator (FMC) – FMCs operate within the Medical Case Management Unit and are co-located with the Field Office Directors (FODs). The FMC identifies and monitors detainees with significant medical conditions, performs case monitoring on detainees who are hospitalized, and assists with alternate placement of detainees in IGSA facilities. He or she gathers information and documents for medical reviews and collaborates with appropriate health officials to ensure continuity of care upon removal for those detainees with significant health conditions. (IHSC Operational Definition)

Suicide – A suicide is a death caused by self-directed injurious behavior with any intent to die as a result of the behavior. In past was often referred to as “completed suicide.” ([CDC Definition](#))

8. **APPLICABLE STANDARDS:**

8-1. **ICE Policy**

- a. ICE policy 14011.1
- b. DROPPM Chapter 44: Significant Incident Reports located at <https://insight.ice.dhs.gov/ero/Pages/memos.aspx>

8-2. **Performance-Based National Detention Standards (PBNDS):**

- a. PBNDS 2011 – Part 4 - Section 4.3, *Medical Care*
- b. PBNDS 2008 – Chapter 22 – *Medical Care*
- c. National Detention Standards 2000 – *Medical Care*

8-3. **ICE Family Residential Standards – 4.3 Medical Care**

8-4. **National Commission on Correctional Health Care, Standards for Health Services in Jails 2014:**

- a. J-A-08, *Communication on Patients' Health Needs*
- b. J-A-10, *Significant Event Notification Reporting*

- 9. PRIVACY AND RECORDKEEPING.** IHSC stores, retrieves, accesses, retains, **and** disposes of these records in accordance with the Privacy Act and as provided in the Alien Health Records System of Records Notice, 80 Fed. Reg. 239 (January 5, 2015). The records in the electronic health record (eHR)/eClinicalWorks (eCW) are destroyed ten (10) years from the date the detainee leaves ICE custody. Retention periods for records of minors may differ. Paper records are scanned into eHR and are destroyed after upload is complete.

Protection of Medical Records and Sensitive Personally Identifiable Information (PII).

- 9-1.** Staff should keep all medical records, whether electronic or paper, secure with access limited only to those officers and employees of the agency who maintain the records and have a need for the records in the performance of their duties. Staff should lock paper records in a secure cabinet or room when not in use or not otherwise under the control of a person with a 'need to know.
- 9-2.** Staff is trained at orientation and annually on the protection of a patient's medical information and Sensitive PII.
- 9-3.** Only authorized individuals with a need for the record in the performance of their duties are permitted to access medical records and Sensitive PII.
- 9-4.** Staff should refer to the Department of Homeland Security *Handbook for Safeguarding Sensitive PII* (Handbook) at:
(b)(7)(E)
when additional information is needed concerning safeguarding sensitive PII.
- 10. NO PRIVATE RIGHT STATEMENT.** This directive is an internal policy statement of IHSC. It is not intended to, and does not create any rights, privileges, or benefits, substantive or procedural, enforceable against the United States; its departments, agencies, or other entities; its officers or employees; or any other person.